

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


Applicant(s): James Maligeorgos	
Application No.: 09/776,392	Group Art Unit: 2817
Filed: 2/2/2001	Examiner: CHANG, JOSEPH
Title: VOLTAGE CONTROLLED QUADRATURE OSCILLATOR WITH PHASE TUNING	Attorney Docket No.: SIL.P0099

LETTER

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

On January 10, 2006, a Change of Correspondence Address form was submitted, changing the correspondence address to Customer Number 30163. However, correspondence is still being sent to the old address. Attached is a copy of the previously submitted Change of Correspondence Address form (which is also in the file history in PAIR). Please change the correspondence address accordingly. Thank you!

Respectfully submitted,

By 

Bruce A. Johnson
Reg. No. 37361

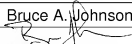
Date: July 28, 2006

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<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	09/776,392	
	Filing Date	2/2/2001	
	First Named Inventor	Maligeorgos, James	
	Group Art Unit	2817	
	Examiner Name	CHANG, JOSEPH	
Total Number of Pages in This Submission	4	Attorney Docket Number	SIL.P0099

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request of Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> - Change of Correspondence Address form - Letter
<input type="checkbox"/> Remarks		Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 to deposit account number 50-3864 (Johnson & Associates).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Johnson & Associates
Signature	Bruce A. Johnson Customer Number 30163
Date	July 28, 2006

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile or electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Bruce A. Johnson
Signature	
Date	July 28, 2006